◆ FATENT APPLICATION FEE DETERMINATION RECO									Application or Docket Number				
•	PATENT	ORE	102367- 00106 10764517										
CLAIMS AS FILED - PART I													
(Column 1) (Column 2)								SMALL TYPE			OR		R THAN ENTITY
TOTAL CLAIMS			9					RATE		FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	+	85.00	OR		
TOTAL CHARGEABLE CLAIMS			9 minus 20=		•	•			╅		1		770.00
INDEPENDENT CLAIMS			/ minus 3 =		•			X\$ 9=			OR	X\$18=	
MULTIPLE DEPENDENT CLAIM PR								X43=			OR	X86≑	
L											OR	+290=	
	* If the difference in column 1 is less than zero, enter "0" in column 2								. [365	OR	TOTAL	
\- :	52-04 c	CLAIMS AS A	MENDE					,	OTHER	THAN			
	(Column 1) (Column 2) (Column 3							SMALI	LEN	TITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT	·	NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	Ti	DDI- ONAL EEE		RATE	ADDI- TIONAL FEE
MQN	Total	Sand	Minus	-			ı	X\$ 9=	Ť		OR	X\$18=	ree
ME	ind pendent	Find	Minus	150				X43=	+			X86≅	· · · ·
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+-	-	OR		
							L	+145=			OR	+290=	
							A	TOTAL DDIT. FEE	- 1		OR ,	TOTAL ADDIT. FEE	
	•••	(Column 1)	,	(Colum		(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	TIC	ODI- ONAL EE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	•	=	ſ	X\$ 9=			OR	X\$18=	
AME	Independent	•	Minus	***		5	T	X43=	T	$\neg \neg$	OR	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEI	PENDENT	CLAIM		r	. 4 45			-	.000	
		L	+145=	<u> </u>		DR L	+290=	•					
		•					A	DIT. FEE	Ŀ	(OR A	TOTAL DDIT. FEE	
Ť		<u>.</u>	-, · ·		-								
AMENDMENIC	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	TIO	DI- NAL		RATE	ADDI- TIONAL FEE
	Total	•	Minus	*		-		X\$ 9=			OR	X\$18=	
	Independent		Minus	delica		= .	+	X43=			.		
`[FIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT	LAIM		\vdash	ハマンニ	<u> </u>	°)R	X86=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
H H	the "Highest Nun the "Highest Nun	nh i is less man the nber Previously Pai nber Previously Paid ber Previously Paid	d For IN THIS d For IN THIS	S SPACE is le S SPACE is l	ess than	20, enter "20."		TOTAL DIT. FEE in the app	or pris			TOTAL DOIT. FEE nn 1.	